

The Professionalization of Social Work

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My comments about the professionalization of social work are based on my observations of the profession in the United States and, therefore, they are not entirely applicable to the situation in Korea. Compared to social work in Korea the profession in the U.S. is much older, and education for the profession is more highly articulated. American social workers have a fairly powerful professional association of 95,000 members and a well established accrediting body that accredits 85 graduate (MSW) programs and over 300 undergraduate (BSW) programs.

Americans assume that there is a much higher degree of strain and conflict between the profession and the bureaucracy (i.e., the organization that provides the context in which service is offered) than the Korean. And, of course, Americans are much more individualistic than the Japanese. (Americans are more individualistic than everyone.) Therefore, you are likely to find many more disagreements and divergences among Americans about the nature and mission of social work than among the Japanese.

Professional Qualifications

There is no agreement either within or outside of the profession about what qualifies someone as a "professional" social worker. Social workers may enter the services and rise through the ranks of the profession and bureaucracy in several ways. Currently, two "entry" level degrees — the BSW and the MSW

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— are offered in colleges and universities, and many schools offer Ph Ds. But entry to many social work jobs can be made by people who have neither degree. Both degrees are recognized by NASW (which began accepting accepting BSWs as members in 1971) and the Council on Social Work Education (CSWE) (which began accrediting BSW programs in 1975). Certification as a professional can be attained through the NASW's Academy of Certified Social Workers (ACSW); and as of 1984, 33 states, Puerto Rico, and the Virgin Islands had some additional form of licensing, certification, registration.⁽¹⁾ These academic degrees and different forms of certification are often used by employing agencies as criteria for hiring social work personnel.

Professional social workers carry out wide-ranging professional and administrative functions including eligibility screening, casework, counseling, case management, advocacy, psychotherapy, social group work, supervision, administration, and planning; and they are employed by many institutions that are not identified primarily as social service agencies such as schools, hospitals, and corporations. Although some social workers (and especially BSWs) consider themselves to be generalists, there has been a proliferation of specializations in the field on the bases of methods (e.g., casework, group work, administration, and social planning) and functional areas (e.g., aging, mental health, and child welfare).

One result of these variations in qualifying criteria and variety of specializations is that neither the public nor social workers themselves can, with certainty, describe the qualifications of a "professional" social worker.

The Knowledge Base Of Social Work

The most important attribute that underlies the claim for autonomy in professional practice is the possession of an identifiable and testable body of knowledge and skill.⁽²⁾ One reason why it is difficult to answer the question "Who is a Social Worker?" is that the knowledge base of the profession is diffuse, largely untested, and interlaced with large variety of political, social, and psychological ideologies.

A profession with a weak knowledge base is, as I have noted elsewhere, more vulnerable to "deprofessionalization" when social forces create demand for

increases in the economic and social mobility of disadvantaged and oppressed groups.⁽³⁾ This is not to say that concern for elimination of such problems as racism and sexism ought not to be high on the political agenda; but in such circumstances it should be expected that a profession like social work will be more likely than some others to discard universalistic values in favor of more particularistic ones. Such a profession is, also, more likely than others to be responsive to popular fads and fashions, and to "young Turks" who have "new" and "innovative" approaches to practice.⁽⁴⁾ Thus, the more fragile a profession's knowledge base, the more likely its practitioners will be to abandon it to seek identification with what is socially acceptable and popular.

The Organizational Base Of Social Work

Historically, social work began in organizational settings such as hospitals and schools as a function that was auxiliary to other professions such as medicine and teaching.⁽⁵⁾ The higher status professions such as law and medicine began with autonomous independent practitioners. It is only within the last few decades that any significant proportion of physicians and attorneys have become organizational employees.

The Claimant and the Organization. One important and frequently overlooked aspect of social work practice is the social worker's function in respect to the different kinds of exchanges that take place between a claimant and an agency. That is, in clinical work, the significant exchange is between a practitioner and a client; what the client receives is *a resource that belongs to the clinician*. In that exchange the professional has a *therapeutic function*; the organization is merely the setting in which the exchange takes place.

However, in a good deal of social work practice, the major resource provided to the claimant is something that is not possessed by the professional: these are resources that belong to agency, resources that the professional allocates *for the agency*. For example, welfare payments, subsidized housing, and admission to programs for job training, rehabilitation, and foster care and adoptions are resources that a professional may allocate for an agency.⁽⁶⁾ In these kinds of exchanges the professional has an *eligibility-determination function*.

Therapeutic and eligibility-determination exchanges between clients/claimants

and professionals are different. In therapeutic exchanges it is the professional's responsibility to make the best use of knowledge and skill on behalf of the client.⁽⁷⁾ But in allocating agency resources to claimants the professional is bound by agency regulations (which are frequently based on legal statutes); it is the professional's task to see that claimants *receive what they are entitled to*, no more, no less.⁽⁸⁾

The concept of "advocacy," which received a great deal of attention in the 1960s and 1970s,⁽⁹⁾ usually glosses over the important distinction between the eligibility-determination function and the therapeutic function⁽¹⁰⁾ The notion of advocacy put forth by American NASW is that adherence to professional standards must take precedence over obligations to an agency if service users' best interests are to be served.⁽¹¹⁾ Although both functions are part of what can be called "intervention" or "clinical social work," they each place different constraints and expectations on the practitioner. The notion of social work advocacy is based on the model of the attorney who functions as advocate in the judge, prosecutor, counsel-for-the-defense triumvirate. But in allocating organizational benefits the social worker is, more correctly, advocate for *both* the claimant and the agency.

The Distinguishing Feature of Social Work. In a broad sense, the organizational functions of professional social workers (i. e., determination of need, eligibility screening, resource allocation, and assessment of personal resources) constitute the most distinguishing feature of the profession of social work. These functions are what makes the work *social*. As Mary Richmond stated it, in carrying out this function the professional enables people to make use of their social resources (i.e., family, friends, the agency and other community groups, and the professional) to meet their needs.⁽¹²⁾

But the profession has never embraced this function with very much enthusiasm, for although it is the profession's most distinctive feature, it is a function that retards the development of professional autonomy because it requires an organizational structure, and agency supervisors and administrators who must have knowledge of, and control over, the interaction between social workers and service users.

Supervision and Administration. Supervision of the professional's work by a superordinate professional has been a standard feature of professional practice since the early part of the century.

At an earlier time, agency supervision of social work practice was justified by

the fact that it was the agency, not the claimant or client, who paid for the worker's services whereas autonomous professionals were paid fees directly by clients. This rationale for the social worker's accountability to the agency rather than to the client is less persuasive nowadays when significant numbers of attorneys and physicians serve clients as salaried employees of agencies, such as in programs of legal services for the poor and medical services programs organized in groups and organizations, while many agency social workers now offer counseling on a fee-for-service basis. There appears to be some convergence between social work and other professions in this regard. Increasingly, social workers can function more autonomously as contractors for third-party payments; and increasingly government is attempting to exercise control over the practices of physicians who are being paid through public and private insurance programs.

Professions vary in the extent to which there is a structurally clearcut separation between the administrative and the professional work of organizations. Medicine and university teaching are at one extreme, and public school teaching at the other. Social work is in between. In most hospitals and universities, for example, administrative and professional functions are almost entirely separate. Medical and administrative staffs in hospitals, and teaching and administrative staffs in universities usually have parallel systems of governance. The administrative staffs usually have a bureaucratic hierarchy; the professional staffs usually function as collegiums of equals. Decisions and policies respecting profession standards of practice are relegated to the collegial system; the administrative system implements these decisions and policies.

At the other extreme, in public schools there is usually an administrative bureaucracy with the principal at its head, and very little, if any, system of governance among colleagues.⁽¹³⁾ As Nina Toren notes, most semi-professions such as nursing and social work are organized more like public school teachers. The dominance of administration in oversight of professional practice is both indicative of, and perpetuates, the low degrees of autonomy exercised by these professionals.⁽¹⁴⁾

Autonomous Practice. Professional autonomy, whereby one's work is judged by colleagues and not "outsiders," is often regarded as the hallmark of professionalism. It has been attained in high degrees only by the most prestigious professions such as law, medicine, and university teaching. As Goode states, it is a "derivative trait...based on both the mastery of a knowledge field and

commitment to the ideal of service.⁽¹⁵⁾

Social workers who carry out psychotherapeutic functions have been attaining higher degrees of autonomy through licensing. But it is doubtful that the profession as-a-whole will ever attain extremely high degrees of autonomy. This is because the psychotherapeutic function *requires* that clients place high degrees of trust in the professional. However, most social workers do not carry out tasks that require high degrees of autonomy. For example, such work as planning, management, information and referral, supervision, social group work, and community organization are, by their very nature, highly visible to the scrutiny of others. It is difficult to argue that claimants for services, group members, and participants in community organizations are in positions of extreme vulnerability in respect to the professional. Certainly, they are not any more vulnerable than people who make use of librarians, school teachers, and public relations specialists. Moreover, social workers should not be autonomous in respect to the significant proportion of practice that involves allocation of agency and or public resources.

This raises question about the consequences for the profession as-a-whole of the high degree of autonomy achieved by social workers engaged primarily in therapeutic work. It is possible that the stature of the entire profession will be raised by the licensing of clinical social workers. It is more likely, though, to lead to a reduction in the cohesion and integrity of the profession. While the outcome of these developments must await empirical verification, the latter result is likely, as evidenced by the proliferation of societies for clinical social work, and the growing number of practitioners in private practice.

A good deal of the language used in social work to describe the organizational relationships and the interactions professionals have with each other obfuscates important issues. For example, the term "supervisory conference" suggests that the relationship between supervisor and worker is collegial rather than sociopolitical.⁽¹⁶⁾ Similarly, the term "staff conference," which is frequently used to describe interaction among different types of professionals in an agency, suggests a higher degree of collegiality than often exists in reality. In most hospital settings, for example, it is the physician who calls the turns, with social workers and others subordinate professionals contributing their knowledge and advice.

If professionals are to function autonomously and to increase professional

knowledge and skills in order to provide to clients the best service that can be given, then education and professional development should be a professional function, not an administrative one. In social service agencies it is often a challenging intellectual task to maintain a separation between the administration's concern for allocating organizational resources and the professional's responsibilities for practice.

Social workers refer to work with other professionals as "team work" rather than with such terms as "interdisciplinary," "interprofessional," and "consultation." In her book on the subject of "teamwork," Brill stresses the importance in "mature" teammateship of achieving consensus and minimizing conflict.⁽¹⁷⁾ But the word "team" implies a degree of equality, and of cooperation, collaboration, and congeniality which does not reflect what frequently occurs in reality. Often, the social worker is treated as subaltern more than as a full-fledged team member, and the fiction of "teammateship" is maintained as a means of bolstering self-esteem.

Sometimes the social worker is referred to as the "case manager" of the "team," but usually lacks the bureaucratic authority over other personnel that management requires. These terms, "team work" and "case management" along with the term "supervision," deny a reality that ought to be recognized if only so the professional operates with a realistic assessment of his/her position.

Professionalism vs. Bureaucracy Professionalism and bureaucracy are, in some ways, mutually supportive, and in other ways in opposition. Both are supportive of the development of specialized knowledge and skills, of rational approaches to problem solving. However, the bureaucrat functions by organizational rules and regulations, presumably applied without prejudice or passion. But in clinical work, the professional is guided by what is in the client's best interests according to the best professional knowledge available. As Etzioni puts it: "The ultimate justification of a professional act is that it is, to the best of the professional's knowledge, the right act... The ultimate justification of an administrative act is that it is line with the organization's rules and regulations, and that it has been approved — directly or by implication — by a superior rank."⁽¹⁸⁾ Thus, a poorly developed knowledge base encourages bureaucratic oversight in management of interaction among colleagues rather than their sharp knowledge-base. The dominance of administration in professional decision making encourages bureaucratic standards for practice rather than professionalism.

The Educational Base of Social Work

Education for the profession has two major weaknesses. First, university social work education has to some degree become superfluous by the use of paraprofessionals (many of whom have no college degree) to fill social work positions, and by the enormous expansion in the numbers of BSW programs that occurred in the U.S. in the 1970s. Both of these developments occurred with

TABLE 1

Changes in Numbers of Programs, Students, and Faculty Members in Social Work Education Programs in 1975 and 1983

	<u>BSW</u>			<u>MSW</u>			<u>DOCTORAL</u>	
a. Number of programs								
1975	165			81			30	
1983	354			83			51	
% Change	(+114.5%)			(+2.5%)			(+70%)	
b. Number of Students	<u>MSW and DOCTORAL</u>							
	<u>FT</u>	<u>PT</u>	<u>SUB-TOTAL</u>	<u>FT</u>	<u>PT</u>	<u>SUB-TOTAL</u>	<u>TOTAL</u>	
1975	22,996	1879	24,875	17,388	3203	20,591	45,466	
1983	20,244	2794	23,038	15,150	8179	23,329	46,367	
% Change	(-12%)	(+48.7%)	(-7.4%)	(-12.9%)	(+155.4%)	(+13.3%)	(+2%)	
c. Number of Faculty	<u>FT</u>	<u>PT</u>	<u>SUB-TOTAL</u>	<u>FT</u>	<u>PT</u>	<u>SUB-TOTAL</u>	<u>TOTAL*</u>	
1975	1194	536	1730	1596	680	2276	4,006	
1983	1346	658	2004	1294	736	2030	4,034	
% Change	(+12.7%)	(+22.8%)	(+15.8%)	(-18.9%)	(+8.2%)	(-10.8%)	(+0.7%)	
						<u>*Total FT</u>		
						2790		
						2640		
						(-5.4%)		

Source : Joseph C. Sheehan, *Statistics on Social Work Education in the United States: 1975* (New York: Council on Social Work Education, 1976) and Allen Rubin, *Statistics on Social Work Education in the United States: 1983* (New York: Council on Social Work Education, 1984).

*To calculate the proportions of teachers allocated to BSW and MSW programs from the category that CSWE designates as "Graduate and Undergraduate", we assigned 50% to BSW teaching and 50% to graduate teaching. While this proportion may be in error, the error is applied consistently for 1975 and 1983. For our purposes here, a consistent error is acceptable if the calculation reflects the true *proportional change* from one year to the other.

the strong support of the organized profession (i.e., NASW and CSWE). Second, there has been in recent years a reduction in the quality of graduate education, which was none too strong to begin with.

Because they are less well educated and therefore have less job mobility, paraprofessionals are more likely than professionals to view their own welfare as intimately linked with their position and status vis-a-vis agency management. And if they make collective efforts to improve their positions they are more likely than professionals to do so through a union than through a professional association. Moreover, policy makers and administrators who are not especially sympathetic to social service users or to the objectives of the profession of social work are likely to *prefer* unqualified workers over qualified ones: they are less expensive to employ, and they are easier to control. Indeed, it has been the case that, since the late 1960s, declassification of professional social work positions has proceeded at a rapid pace.⁽¹⁹⁾

Recommendations and Conclusions

There are several courses of action that the profession might take in response to some of the issues adverted above. *First*, the profession can, itself, begin to reverse the decline of professionalism by discontinuing its support of lower entry-level professional qualifications in order to strengthen the knowledge base and qualifications of its practitioners. Over a period of years, organized profession, should discontinue support of BSW degree programs, leaving sufficient time for schools and colleges to convert them to liberal arts majors or phase them out.

Second, university education must strive for higher degrees of excellence. Universities should not attempt to educate people for jobs when bureaucracies are able to do so. That is, we should separate training from education for a profession. We have noted that while the scope of social work is quite extensive, educational resources devoted to university education have been severely curtailed in the last decade. The numbers of students brought into university education should be trimmed so that existing resources can be used to provide education of high quality to students of high quality. In the long run, the profession and the community will be better served by having fewer university graduates who are more adequately prepared to utilize professional knowledge and skill.

Third, the professional should continue to work in support of systems for licensing professional social workers. For example, the rigor of the ACSW certification offered by NASW could be increased in some degree, and state chapters urged to require it as a precondition to other licenses offered by states. *Fourth*, professional association should develop a program to encourage agencies to facilitate consultation, conferring, and evaluation of practice among colleagues because this is the way to assure that professionals maintain high standards of practice. These should be professional activities that are separate from administration. The term "peer-group supervision"⁽²⁰⁾ has been proposed as an alternative to the term "supervision," but it does not clarify the differences between collegial and bureaucratic exchanges sufficiently. "Peer review" is, perhaps, a better term. The word "peer" in this phrase does not mean "equal," as when we refer to "trial by a jury of one's peers." In a professional context it refers to review by members of the profession who have achieved high degrees of professional competence. This qualification is necessary if such reviews are to serve the purpose of maintaining high standards of practice.

And *finally*, the terms "supervision," "advocacy," "team work" and "case management" require clarification. Each of them occupies an important place in the professional vocabulary. And like a clever fan dancer, each conceals at least as much as it reveals. Each of them would constitute the subject of careful and systematic study.

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Social workers do not all agree that enhancement of the status, prestige, and autonomy of social work professionals is a desirable objective. Withorn, for example, represents the views of radical social work "professional practice teaches distance from clients and identification with one's agency" and that "the substance of professionalization supports a capitalist ideology."⁽²¹⁾ Others see increased professionalism as self-serving, a striving for power over clients which ultimately results in the professional's abandonment of social work's mission to serve the poor, oppressed, and disadvantaged.⁽²²⁾

In the long run, though, what professionals do with their professionalism will be determined more by the community's understanding and response to social needs and the place of the social services in dealing with them than by the

choices of individual professionals. Certainly, the current neo-conservatism in government is discouraging, and public support for the welfare state is at a low ebb. But the central problems around which the welfare state was built remain, and they appear to be increasing: economic dependency, malnutrition, neglected and abused children, the mentally ill, the frail and dependent aged, and so forth. It is important to note that, generally, there is not strong public unwillingness to deal with these particular problems; public discontent is directed more at the welfare system which is, according to some of our most outstanding social welfare scholars, frequently irrational, wasteful, contradictory, and unfair.⁽²³⁾ Many pro-social welfare analysts have identified and acknowledged the need for reform of the welfare system, an objective that has eluded both Democratic and Republican administrations for the last two decades.

Whether or not there will be in the next decades a renewal of public commitment to, and confidence in, the welfare state is a question that we cannot answer. If there is such renewal, professional social workers will be presented with opportunities to build exciting and rewarding careers in developing and enhancing community-sponsored services. If there is not, the profession is likely to continue in the direction of producing psychotherapists and private practitioners on the one side, as the workforce in the public service continues to be declassified and deprofessionalized on the other. The latter forecast is not one for which the profession ought to be preparing itself. Rather, it is for a future in which the profession can realize its objectives of enabling the community to use its resources wisely and efficiently to meet social needs. These recommendations are made with that future in mind.

Notes and References

- (1) National Association of Social Workers, *State Comparison of Laws Regulating Social Work* (Silver spring, Md.: 1984).
- (2) Greenwood discusses many of these issues in Ernest Greenwood "Attributes of a Profession Revisited." Neil Gilberet and Harry Specht, eds., *The Emergence of Social Welfare and Social Work*(Itasca, Ill.: F.E. Peacock, Publ., 1981, pp.255-276)
- (3) Harry Specht, "The Deprofessionalization of Social Work," *Social Work*

17: 2 (March 1972), pp. 3-15.

- (4) "Turks" are usually young because positions of status and prestige are almost invariably occupied by the older and more established members of a profession, and it is the newer entrants who must compete for place. However, in social work, "young Turks" become old and established rather quickly.
- (5) Jane H. Pfouts and Arthru E. Funk, "Development of Social Programs in the United States," in Arthur E. Funk, Jane H. Pfouts, and Andrew W. Dobelstein, eds., *The Field of Social Work* 8th Ed. (Beverly Hills, Ca.: Sage Publications, 1985), pp.73-97.
- (6) Paul A. Kurzman, "Psychosocial Assessment in Social work: The Route to Clienthood," *Social Casework*(forthcoming in 1986).
- (7) Of course, in carrying out the eligibility-determination function, the social worker may be helping the claimant in a therapeutic way by clarifying, providing reality testing, giving information, and making referrals. These tasks, along with enabling a claimant to express and make use of anger and feelings of frustration and rejection may be therapeutic. However, the *primary* objective of the interaction is eligibility determination unless and until an explicit agreement (or contract) is made for the claimant to become the worker's client. (This idea is from Joan Dunkel in a personal communication; also *see ibid.*)
- (8) Some allocative decisions are so complex that they cannot be defined by law or in guidelines, and they are left to administrative or professional "discretion." That is, the decisions are neither so concrete or obvious that just anyone can judge, and these decisions must be based on expert knowledge and skill. What are the differences between administrative and professional discretion? Presumably, administrative discretion refers to allocations of agency resources, and professional discretion refers to uses of professional knowledge and skill. Practically, though, the two are not easily separated because, frequently, professional knowledge and skill are needed to allocate organizational resources. Determining, for example, which applicants, of many who are eligible, should receive an agency service that is in short supply may require a mix of both administrative and professional authority and skill because issues of costs, agency policy, law, need, prognosis, and efficiency may be involved. (*see ibid.*)

- (9) Ad Hoc Committee on Advocacy, "The Social Work As Advocate: Champions of Social Victims," *Social Work* 14:2 (April 1969), pp.16-22.
- (10) _____, "Psychosocial Assessment..."
- (11) Neil Gilbert and Harry Specht, "Advocacy and Professional Ethics," *Social Work* 21:4 (July 1976) pp.288-293.
- (12) _____, "Psychosocial Assessment..."
- (13) Dan C. Lortie, "The Balance of Control and Autonomy in Elementary School Teaching," Amitai Etzioni, ed., *The Semi-Professions and Their Organization: Teachers, Nurses, Social Workers* (New York: The Free Press, 1969)
- (14) Nina Toren, *Social Work: The Case of a Semi-Profession* (Beverly Hills, Ca.: Sage Publications, 1972).
- (15) William J. Goode, "The Theoretical Limits of Professionalization," in Etzioni, *The Semi-Professions and Their Organization*, p.291.
- (16) The "sociopolitical" interaction of professionals is concerned primarily with exchange of organizational resources (e.g., money, authority, and facilities). See Harry Specht, "Managing Professional Interpersonal Interactions," *Social Work* 30:3 (May-June 1985), p.228.
- (17) Naomi I. Brill, *Teamwork: Working Together in the Human Services* (Philadelphia: J.B. Lippincott, 1976), pp.79-80.
- (18) Etzioni, *The Semi-professions and their Organization*, p.x.
- (19) Robert J. Teare, "Reclassification and Licensing," Scott Briar, et al., *1983-1984 Supplement to the Encyclopedia of Social Work: 17th Edition* (Silver Spring, Md.: National Association of Social Workers, 1983), pp.120-127.
- (20) Ruth Fizdale, "Peer-Group Supervision," *Social Casework* 30:10 (October 1958), pp.443-450.
- (21) Ann Withorn, *Serving the People: Social Services and Social Change* (New York: Columbia University Press, 1984), p.115.
- (22) Irwin Epstein and Kayla Conrad, "The Empirical Limits of Social Work Professionalization," Rosemary C. Sarri and Yesheskel Hasenfeld, eds., *The Management of Human Services* (New York: Columbia University Press, 1978), pp.163-183.
- (23) Neil Gilbert, *Capitalism and the Welfare State* (New Haven: Yale University Press, 1983).